

Indiana Criminal Justice Institute
ENFORCING UNDERAGE DRINKING LAWS – COLLEGE UNDERAGE
DRINKING AWARENESS GRANT APPLICATION

(See instructions on page three)

<i>For ICJI Use Only</i>	
Date Received: _____ / _____ / _____	Federal Award: \$ _____
Purpose Area: _____	Grant Number: _____

A Project Title: _____

B Beginning Date of Project: / / Ending Date of Project: / /

IMPLEMENTING AGENCY

C Type of Agency/Organization: _____

D Name of Agency/Organization: _____

Address: _____

City: _____ State: _____ Zip code: _____ County: _____

Email: _____

Tel: _____ / _____ / _____ Fax: _____ / _____ / _____

E Project Director:

Name of Agency/Organization: _____

Address: _____

City: _____ State: _____ Zip code: _____ County: _____

Email: _____

Tel: _____ / _____ / _____ Fax: _____ / _____ / _____

F Other Contact: _____

Tel: _____ / _____ / _____ Email: _____

FUNDING REQUEST

G. Amount of Funding Requested

A. PERSONNEL	
B. CONTRACTUAL SERVICES	
C. TRAVEL	
D. EQUIPMENT	
E. OPERATING EXPENSES	
TOTAL	

PROJECT INFORMATION**Instructions for A-G**

Please read all instructions before completing the application and contact the Institute if you have questions. Failing to follow instructions or submitting an incomplete application will delay the processing of your grant application. You do not have to complete an application item if it is blocked out by shading. Please do not include copies of the instructions with your completed application.

- A** Enter the title of the project for which funds are being requested.
- B** Enter the beginning and ending dates for the proposed project.
- C** Indicate the type of Implementing agency.
- D** The Implementing Agency is the unit, department, division, organization, or agency responsible for maintaining general oversight of the project's implementation and grant administration, including the submission of all reports required by the Institute.
- E** The Project Director is the individual charged by the Implementing Agency with direct responsibility for the day-to-day management of the project and grant administration.
- F** Enter the name and contact information for the person who will serve as the principal contact for grant administration if other than the Project Director.
- G** Enter the amount of funding requested.

Instructions and Definitions for H, I, and J

A **Problem Identification Statement** succinctly states the problem in your community you intend to address through the proposed project. Community is defined as a campus of students and its Data and information illustrating the problem should be included as part of your Problem Identification Statement.

A **Project Description** briefly describes the project that is being proposed. A good project description will (a) describe an approach or remedy to the problem identified above, (b) list the people who will benefit from the project (be as specific as possible [both direct and indirect beneficiaries]) and (c) indicate how long it will take to see results from the project.

A **Project Goal** is a concise statement indicating what the project is expected to achieve (i.e., its desired outcome). Some examples include: Reduce underage drinking on and around campus by 50%.

Project Objectives specify *measurable* outcomes related to the goal, including the expected level or amount of change and the date by which the change is expected to occur. For example, objectives for the goal “Reduce underage drinking on and around campus by 50%” might include:

Objective 1: By the end of the grant period, reduce the number of underage drinking arrests by 25%.

Objective 2: By the end of the grant period, reduce the number of alcohol sales to those under 21.

Project Activities are the specific activities or steps that will be taken to achieve each objective. For example, activities for the two objectives listed above might include:

Objective 1: By the end of the grant period, reduce the number of underage drinking arrests by 25%.

Activity 1: Work with local law enforcement

Activity 2: Saturation patrols on bars near campus

Activity 3: Involve local businesses (bar, restaurants, etc) by educating them on the laws associated with sales to those under 21.

Objective 2: By the end of the grant period, reduce the number of alcohol sales to those under 21.

Activity 1: Train local law enforcement on how to identify a fake ID.

Activity 2: Distribute flyers to let students know the consequences of purchasing alcohol.

Activity 3: Work with other student organizations to offer alternative programming for students.

H Problem Identification Statement. In the space provided, please provide your Problem Identification Statement by succinctly stating why do you see underage/binge drinking as a problem on your campus. Please include any data/information on the problem on your campus.

I Project Description. In the space provided, please briefly describe the project that is being proposed and how it addresses the problem you identified in your Problem Identification Statement. A good project description will (a) describe an approach or remedy to the problem, (b) list the people who will benefit from the project (be as specific as possible [both direct and indirect beneficiaries]) and (c) indicate how long will it take to see results from this project.

J In column (a), list the overall **Goal** of the proposed project. In column (b), list up to three specific **Project Objectives** related to that goal. And in column (c), list the **Project Activities** or steps you plan to take to achieve the objectives you have listed. Please refer to the instruction on page 3 of this application for definitions and examples.

(a) Project Goal - List the overall goal of your project

(b) Project Goal Project Objectives – List up to three specific objectives that support the project goal

1

2

3

(c) Project Activities - List as many activities as needed that support the project activities.

K Place a checkmark next to all of the types of agencies/organizations that you will collaborate or coordinate with on the proposed project and then provide the name of each agency/organization on the line provided:

Criminal Justice Government Agencies

☐ Law Enforcement

☐ Other _____

Non-Criminal Justice Government Agencies

☐ Social Services

☐ Schools

☐ Mental Health

☐ Other _____

Private Non-Profit Agencies

☐ Hospital

☐ Religious Org.

Other _____

Other

☐ _____

☐ _____

L Who will evaluate the effectiveness of the project (check all that apply):

☐ Subgrantee agency personnel

☐ Independent evaluators (e.g., university research staff, a private research firm)

M How will the effectiveness of the project be evaluated (check all that apply):

☐ Collection and analysis of statistical systems data (e.g., arrest reports)

☐ Obtaining feedback on immediate impact before participants, attendees, users, or recipients leave the site of the service, training, etc.

☐ Other (specify):

Indiana Criminal Justice Institute
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DRINKING AWARENESS GRANT
(All signatures must be original signatures)

The APPLICANT, through the following signatories, certifies that the statements in this grant are true and complete to the best of the APPLICANT’S knowledge and accepts, as to any grant awarded, the obligation to comply with any Indiana Criminal Justice Institute special conditions specified in the Grant Award. “The signatories certify that we have read the instructions for this application and are fully cognizant of our duties and responsibilities with regards to the implementation of the project proposed in the application.”

- **Director of Implementing Agency** – Director or similar representative of the Implementing Agency Identified in **Item D on page 2** of the grant application.
- **Project Director** – The Project Director identified in **Item E on page 2** of the grant application.

A. Signature _____
Director of Implementing Agency Title Date

B. Signature _____
Project Director Title Date